## TOWN OF TRURO HIGHLAND LINKS SEASONAL PASS APPLICATION 2006

Name:

	(Please Print)			
Name of Spouse:	(If applicable)	(If applicable)		
Home Address:				-
Mailing Address:				-
Telephone:	ephone: Home #:		Work #:	
Occupation:		Company:		
THE GOLF SEAS	SONAL PASS IS "NOT" REFU	NDABLE - NO EXC	CEPTIONS	
1.	Single	\$550.00	\$	
2.	Senior (59 and over)	\$495.00	\$	
3.	Member 18 & Under	\$100.00	\$	
4.	Trail Fee	\$400.00	\$ \$	
	TOTAL FEE DUE WITH A	APPLICATION	\$	
the Golf Course M	MGA HANDICAPS As entitles you to privileges of the lanager. This Seasonal Pass may be ger if your actions are unbecoming	Highland Links as se be canceled or suspen ng as a member of th	et fourth by the Board of Standed at any time at the disternment of the Highland Links.	
	The Seasonal Pass expire	es on the 31st of Ma	arch annually.	
Signature of Applicant		Date		
Mail completed ap Make checks payal	-		Truro MA 02652-0162	